STATE OF WASHINGTON DEPT. OF GENERAL ADMINISTRATION

	Co	Contract No.	
		FA_	
ENCY			

С

DISTRUCTION FIELD AUTHORIZATION	PROJECT TITLE	
TO:	DATE	
When authorized by E&AS, you are directed to proceed with work a		nents referred hereto:
REASON FOR CHANGE  CHANGE ORIGINATED BY  (name)  It is our opinion that this work will result in a change to the complete to t		
REASON FOR CHANGE		
CHANGE ORIGINATED BY		
(name)	comp	any)
It is our opinion that this work will result in a change to the c  TINCREASE  TO THE CONTRACT AMOUNT W	VITHIN THE MAXIMUM COST OF:	
NO CHANGE		
DECREASE		\$
CONTRACT COMPLETION DATE: INCREASE	NO CHANGE DECREASE OF	CALENDAR DAYS
Payment for work authorized by this FA will not be	made prior to incorporation of this FA into a Cha	nge Order.
DATE COST DATA REQUIRED BY	(DATE).	
Cost data required by one of the following methods in accorda	nce with the General and Supplemental Cond	itions.
UNIT PRICE	(Method of Measurement)	
DETAILED COST BREAKDOWN  ACTUAL COST: T&M with daily work sheets that list the name, related costs. Contractor must obtain verification of hours from		
ACTUAL COST: T&M with daily work sheets that list the name,	trade, firm, hours, itemized materials, equipment	and other job
related costs. Contractor must obtain verification of hours from within days from the day work was perfor	rmed. (Owner's Rep.)	
The above amount covers the maximum amount required in co	milection with the change.	
ACCEPTED BY	CONTRACTOR	DATE
We have carefully examined this proposal and find the maximu	IIII COST TO DE FEASONADIE.	
APPROVED BY	A/E	DATE
We have carefully examined this proposal and find the maximus  APPROVED BY  FUNDING VERIFICATION BY  AUTHORIZED BY	AGENCY	DATE
AUTHORIZED BY	E&AS	DATE
The final cost breakdown has been examined and is reasonable	e.	
COST VERIFICATION	E&AS	DATE
COST VERIFICATION  RM GEN-EA-001 (Revised 12/97)	ΕαΑΟ	DATE